



THE URBAN DISTRICT COUNCIL OF GOOLE.

ANNUAL REPORT

ON THE

Health of Goole,

For the Year 1910,

BY

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Goole :

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Names of the Councillors

1910-11.

MR. COUNCILLOR W. E. GRAYBURN, J.P., CHAIRMAN,

„ „ F. CHAMBERS, VICE-CHAIRMAN.

NORTH WARD.

MR. COUNCILLOR J. B. TIMM.

„ „ G. C. SHORT.

„ „ L. HOLMES.

SOUTH WARD.

MR. COUNCILLOR J. CHALMERS.

„ „ R. G. BICKERTON.

„ „ G. E. HILL.

EAST WARD.

MR. COUNCILLOR R. H. HUNTINGTON.

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„ „ T. FIRTH.

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MR. COUNCILLOR W. E. GRAYBURN.

„ „ F. B. GLEW.

„ „ S. G. BEVAN.

OFFICIALS OF THE HEALTH DEPARTMENT.

A. M. ERSKINE, M.D. MEDICAL OFFICER OF HEALTH.

W. H. ELLIS SANITARY INSPECTOR.

ERNEST KING PROBATIONER.

SUMMARY

OF

Vital and Mortal Statistics.

Area	....	....	....	....	1,218 acres
Estimated Population	....	....	....	....	19,000
Marriages	....	....	....	161	rate 16
Births	....	....	....	630	rate 33·1
Deaths	....	....	....	290	rate 15·2
Infantile Mortality	....	....	....	....	115
Zymotic Death-rate	....	....	....	....	1·2
Phthisis Death-rate	....	....	....	....	1
Number of Notifications	....	....	....	....	136
Rateable Value	....	....	....	£82,101	7s. 2d.
Penny Rate produces	....	....	....	£250	
District Rate	....	....	....	....	3/4
Poor Rate	....	....	....	....	3/4

Vital Statistics for the year 1910.

1910.	ENGLAND AND WALES.	Great Towns (77).	Smaller Towns (136).	England and Wales <i>less</i> the 213 Towns.
BIRTH-RATE	24·8*	25·0	23·7	25·0
DEATH-RATE	13·4*	13·4	12·4	13·6
Zymotic Death-Rate ..	0·99	1·23	0·88	0·74
Infantile Mortality ... (per 1,000 births)	106	115	104	96

* Lowest ever recorded.

To the Chairman and Members of the Goole Urban District Council.

GENTLEMEN,

I have the honour to submit for your information and consideration my Report on the Public Health and Sanitary Condition of the Urban District of Goole for the year 1910.

The birth-rate for the year is 33·1, a decrease compared with the previous two years.

The death-rate for the year is 15·2, an increase compared with the preceding year, but a continuing decrease compared with other years.

The death-rate of children under one year of age is 115, an increase compared with the preceding year, but much lower when compared with the average for the past ten years.

The zymotic death-rate for the year is 1·2.

The phthisis death-rate for the year is 1.

I would draw your special attention to my remarks under phthisis. What is called the tuberculin treatment of this disease gives us an altogether brighter and more hopeful outlook in dealing with consumption, and I might mention in this connection that the guardians have afforded me facilities for applying it to those notified under the Poor Law Regulations.

I am,

Your obedient servant,

A. M. ERSKINE.

Presented 15th February, 1911.

Extract from Local Government Board Order.

By the Order of the Local Government Board dated March 23rd, 1891, Section 14, it is prescribed that the Medical Officer of Health shall “ prepare an Annual Report, to be made to the end of December “ in each year, comprising a summary of the action taken during the “ year for preventing the spread of disease, and an account of the “ sanitary state of his district generally at the end of the year. The “ report shall also contain an account of the enquiries which he has “ made as to the conditions injurious to health existing in his district, “ and of proceedings in which he has taken part or advised under the “ Public Health Act, 1875, so far as such proceedings relate to those “ conditions ; and also an account of the supervision exercised by him “ or on his advice for sanitary purposes over places and houses that “ Sanitary Authorities have power to regulate, with the nature and “ results of any proceedings which may have been so required and “ taken in respect of the same during the year. It shall also record “ the action taken by him on his advice during the year in regard “ to offensive trades and to factories and workshops. The report “ shall also contain tabular statements (on forms to be supplied by “ the Local Government, or to the like effect) of the sickness and “ mortality within the district classified according to disease, ages, “ and localities.”

Extract from Local Government Board's Memorandum as to Annual Reports of Medical Officers of Health.

“The report should be chiefly concerned with the conditions affecting the health of the district and with the means for improving those conditions. It should contain an account, brought up to the end of the year under review, of the sanitary circumstances of the district, and of any improvement or deterioration in these circumstances which may have occurred during the year. Care should be taken to report fully and explicitly on the influences affecting or threatening to affect injuriously the public health in the district, and on the action which has been taken, or which may still be needed, with a view to combat those influences. It is of special importance that the medical officer of health should record what action has been taken to remedy unhealthy conditions which have been reported by him in previous annual reports, or in special reports presented during the year under review, and that attention should be called afresh, year by year, to such as remain unremedied.

“The following deserve to be especially borne in mind as subjects concerning which the Board desire to obtain, through annual reports of the medical officer of health, not only definite general information, but record also of particular changes of condition that may have occurred incidentally or by action of the local authority:—

“Physical features and general character of the district and
“general conditions of its population.

“The chief occupations of the inhabitants, and the influence of
“any particular occupation on public health.

“House accommodation, especially for the working classes; its
“adequacy and fitness for habitation. Sufficiency of open
“space about houses, and cleanliness of surroundings.
“Supervision over erection of new houses. Action under
“Parts 1, 2, and 3 respectively of the Housing of the
“Working Classes Act, taken or needed.

“Water supply of the district or of its several parts: its source
“ (from public service or otherwise), nature (river water,
“ well water, upland water, etc.), sufficiency, wholesomeness,
“ and freedom (by special treatment or otherwise) from risks
“ of pollution. In the case of waters liable to have plumbosolvent action, any facts, either clinical or chemical,
“ whether negative or positive, as to contamination of the
“ water by lead should be stated, and whether administrative action has been taken during the year in respect of
“ such contamination.

- “ Milk supply : character and wholesomeness of milk produced
 - “ within the district or imported ; condition of dairies, cow-
 - “ sheds, and milkshops ; administration in regard to milk.
 - “ Tuberculous milk.
- “ Other foods : unsound food and food inspection ; sanitary con-
 - “ dition of premises where foods are prepared, stored, or
 - “ exposed for sale. Meat inspection, disease in meat, and
 - “ condition of slaughter-houses. Action under of Sale of Food
 - “ and Drugs Act, taken or needed. Action under section 117
 - “ of the Public Health Act, 1875. Number of carcasses and
 - “ parts of carcasses condemned for tuberculosis.
- “ Sewerage and drainage : its sufficiency in all parts of the
 - “ district. Condition of the sewers and house drains.
 - “ Method or methods of disposal of sewage. Localities
 - “ where improvements are needed.
- “ Pollution of rivers and streams in the district : the sources
 - “ and nature of such pollution, and any action taken to
 - “ check it.
- “ Excrement disposal : system in vogue ; defects, if any.
- “ Removal and disposal of house refuse, whether by public
 - “ scavenger or occupiers : frequency and method.
- “ Nuisances : proceedings for their abatement, any remaining
 - “ unabated.
- “ Bye-laws as to houses let in lodgings, offensive trades, etc.
 - Details as to number of premises coming under each set of
 - “ bye-laws, and action taken. Any need of amendment or
 - “ further bye-laws.
- “ Schools, especially public elementary schools : sanitary condi-
 - “ tion of, including water supply ; action taken in relation
 - “ to the health of the scholars and for preventing the spread
 - “ of infectious disease.
- “ Methods of dealing with infectious diseases ; notification ; isola-
 - “ tion hospital accommodation, its sufficiency and efficiency ;
 - “ disinfection.
- “ Methods of control of tuberculosis ; whether any system of
 - “ notification of cases of pulmonary tuberculosis, compulsory
 - “ or voluntary, is in operation. Number of cases notified :
 - “ what action is taken in respect of known cases and of
 - “ deaths. Amount of hospital accommodation for cases of
 - “ pulmonary tuberculosis in infirmaries and elsewhere, for
 - “ advanced and for earlier cases of the disease.
- “ With regard to the preceding points it should be remembered
 - “ that these reports are for the information of the Board and of the
 - “ County Council as well as of the Council of the District, and that a

“ statement of the local circumstances and a history of local sanitary
 “ questions which may seem superfluous for the latter may often be
 “ needed by the former bodies.

“ It is expected that each of the preceding points will be men-
 “ tioned in the annual report, and the extent of action or the absence
 “ of action on each of them definitely stated.

“ The report should deal with the extent, distribution, and causes
 “ of disease, especially of epidemic and nonifiable diseases and of
 “ tuberculosis, within the district ; and should give an account of any
 “ noteworthy outbreaks of disease which may have engaged the atten-
 “ tion of the medical officer of health, during the year under review,
 “ stating the result of his investigations into their origin and propa-
 “ gation, and the steps taken by him, or on his advice, with a view
 “ to check their spread. Attention should be called to cases in which
 “ disease is attributed to the consumption of particular articles of
 “ food, including shell-fish.”

Report on the Health of Goole for the Year 1910.

Physical Features and General Character of the District.

The town of Goole is situated at the extreme eastern part of the West Riding, in the northern part of the flat alluvial plain of the Vale of York. It is placed on the western bank of the River Ouse, and lies at a lower level than the waters of the ordinary tides. These are prevented from overflowing by artificially raised banks. The general level of the town is ten feet above sea level. The stratum lying immediately under the natural soil is a layer of peat, resting upon a thick bed of stiff clay.

Chief Occupation of the Inhabitants.

Being a seaport town the chief occupation of the inhabitants is directly or indirectly associated with shipping. There are three shipbuilding and repairing yards, and two chemical works; in addition, Goole is the centre of an important agricultural district, and during the year under review dock extension works have been in progress, causing a considerable addition of navvies to the population. None of these occupations exert any prejudicial influence on the public health.

Population.

The natural increase of population for the year, i.e., the excess of births over deaths is 340, compared with 413 in 1909.

Mr. Buck has again kindly furnished me with the following return of houses in occupation at the end of 1910:

East Ward ...	...	...	...	1224
North Ward	...	...	...	1192
West Ward...	...	...	...	653
Central Ward	...	...	...	431
South Ward	...	...	...	956
Total				4456

An increase of 72 compared with the previous year, chiefly in the East and North Wards.

I have estimated the population to the middle of the year as 19,000, and the birth and death rates are calculated upon this figure.

For next year the official census figures will be available.

Births.

The total number of births registered during the year is 630, giving a birth rate of 33·1 per 1000 of the population.

During the previous year there were 667 births, with a birth rate of 35·3 per 1000, and the average for the past ten years is 613 or a birth rate of 35·1.

Of the births 309 are males, and 321 females.

Arranged according to Wards, 188 were registered in the North Ward, 162 in the South Ward, 170 in the East Ward, 60 in the West Ward, and 50 in the Central Ward.

These figures show a decreased birth rate for the year, compared with the previous two years. The North Ward alone shows an increase, all the other Wards record a decreased number.

There were 29 illegitimate births, compared with 26 in the previous year.

35 still-born children were buried in the cemetery, compared with 30 in 1909.

The average birth rate for England and Wales in 1910 is 24 8 ; 25·0 for 77 great towns, 23·7 for 136 small towns.

Marriages.

The number of marriages celebrated in the Urban District during the year is 161, being an annual rate of 16 persons married per 1000 of the population. Last year the marriage rate was 18.

Deaths.

The gross total number of deaths registered during the year is 290, giving a death rate of 15·2 per 1000 of the estimated population. If the deaths of 14 persons not belonging to the town (non-residents) be deducted, and those of 14 persons who died in public institutions outside the districts (residents) be added, the **nett total number of deaths is 290, giving a nett death rate of 15·2 per 1000 of the estimated population.**

The institutions from which the deaths of "residents" outside the district have been obtained were: The Leeds Infirmary, The Hull Infirmary, The West Riding Asylums, The Sanatorium (Hook), and Hull Docks.

Of the deaths 140 are males, and 150 females.

Last year the death rate was 13·4, and the average for the past 10 years is 17·3.

The death rate for England and Wales during 1910 is 13·4; 13·4 for 77 great towns, and 12·4 for 136 small towns.

I have thus to record an increased death rate for the year, compared with the previous year, which was an unusually low one. If we leave out the year 1909 and compare it with the preceding years, the death rate continues a decreasing one. Taking the last ten years for comparison, the highest death rate was 22·4 in 1904. This figure has been steadily declining year by year, and excepting the year 1909 15·2 is the lowest rate yet recorded. From 13·4 to 15·2 is, however, too large a jump to be considered satisfactory. Analysis of the death returns does not help us very much. The East and West Wards actually show a lessened number of deaths, whereas the South, North, and (in a small measure) the West Wards show an increase. Furthermore the increased deaths in the North and South Wards were not due to infectious disease, excepting perhaps diarrhoeal diseases, in which there was a moderately increased number of deaths, and the deaths of infants does not sufficiently account for the increase; neither is it due to the ordinary diseases of adult life which are classified in Table IV. under "All other causes."

The only conclusion to be drawn is that the year 1910 was not so healthy a year as 1909. Climatic conditions were distinctly unfavourable, very little sunshine with a good deal of rain, and heavily laden atmosphere, combined with a damp subsoil.

Arranged according to Wards 73 deaths were registered in the North Ward, compared with 54 in 1909.

74 in the South Ward compared with 49 in 1909.

68	,,	East	,,	,,	76	,,
36	,,	West	,,	,,	29	,,
38	,,	Central	,,	,,	46	,,

The North and South Wards contain the largest proportion of our working class population.

Comparing the totals of deaths in 1910 with those in 1909, we find as follows:

Deaths from		1910		1909	
Measles	...	3	...	1	
Scarlet Fever	...	0	...	0	
Whooping Cough		1	...	4	
Diphtheria	...	6	...	5	
Typhoid Fever	...	0	...	1	
Diarrhœa	...	14	...	4	
Enteritis	...	4	...	2	

All of these are more or less preventible diseases, and to these may be added

		1910		1909	
Phthisis	...	20	...	17	
Other Tubercular diseases		14	...	14	

Extending this table further there were in

	1910	1909
Deaths under 1 year	73	62
Age period 1 to 5 years	33	28
Cancer ...	21	14
Bronchitis ...	23	21
Pneumonia ...	29	27
Premature birth ...	11	15
Accidents ...	8	12
65 and upwards ...	64	55
Age period 25 to 65...	93	85

In Table IV. after separating the more important diseases under separate headings, the remaining deaths are not classified, but are placed under "all other causes," and under this heading we find in 1910 99 deaths, and in 1909 69 deaths

Looking at the deaths from the ward point of view we find that in the North Ward in 1910 there were 23 deaths under "all other causes," compared with 10 in 1909.

And in the South Ward there were 25 under "all other causes" in 1910, compared with 20 in 1909. In the South Ward there were 14 deaths from tubercular disease, compared with 5 in 1909; and 5 deaths from cancer, compared with 1 in 1909.

Deaths under Five years of age.

The total number of deaths under the age of five years is 106. This figure compares:—

In 1902	with	148 deaths under five years.
„ 1903	„	114
„ 1904	„	190
„ 1905	„	117
„ 1906	„	107
„ 1907	„	105
„ 1908	„	159
„ 1909	„	90

Inquests.

There were 14 inquests held during the year. Of these deaths 6 were due to natural causes, 3 to accidents, 2 to drowning, 2 overlaying, and 1 suicide.

TABLE I.

VITAL STATISTICS DURING 1910 AND PREVIOUS YEARS IN
THE URBAN DISTRICT OF GOOLE.

Year.	Population estimated to Middle of each year.	BIRTHS.		DEATHS UNDER ONE YEAR OF AGE.		DEATHS AT ALL AGES. TOTAL.		Deaths in Public Institutions.	Deaths of Non-Residents registered in District.	Deaths of Residents regis- tered beyond District.	DEATHS AT ALL AGES. NET.	
		Number.	Rate.*	Number.	Rate per 1000 Births registered.	Number.	Rate.*				Number.	Rate.*
1900 ..	16456	580	35.2	76	131	299	18.1	48	13	3	289	17.5
1901 ..	16576	642	38.7	95	145	295	17.6	30	9	7	293	17.6
1902 ..	16723	563	33.6	106	188	319	19.0	31	9	3	313	18.8
1903 ..	16850	594	35.2	89	149	320	17.8	45	8	4	295	17.5
1904 ..	17000	567	33.9	151	266	397	23.3	47	16	3	381	22.4
1905 ..	17500	577	32.9	83	152	301	17.2	31	11	5	293	16.7
1906 ..	17800	660	37.0	98	148	308	17.3	40	12	4	300	16.8
1907 ..	18000	610	33.8	78	127	282	15.6	32	9	12	285	15.8
1908 ..	18582	673	36.2	102	151	320	17.2	47	17	9	312	16.7
1909 ..	18868	667	35.3	62	93	261	13.8	40	16	9	254	13.4
Av'ages '00-1909)	17435	613	35.1	94	155	308	17.6	39	12	5	301	17.3
1910	19000	630	33.1	73	115	290	15.2	31	14	14	290	15.2

* Rates calculated per 1,000 of estimated population.

Area of District in acres (exclusive of area covered by water) .. 1,218 Acres.

Total population at all ages	16,576	} At Census of 1901.
Number of inhabited houses	3,538	
Average number of persons per house	4.68	

TABLE II.

VITAL STATISTICS OF SEPARATE LOCALITIES IN 1910 AND PREVIOUS YEARS IN THE URBAN DISTRICT OF GOOLE.

NAMES OF LOCALITIES.	NORTH.				SOUTH.				EAST.				WEST.				CENTRAL.			
	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
1901	4354	177	77	26	4100	170	74	26	3660	118	62	19	2722	116	45	17	1740	61	29	5
1902	4388	148	86	21	4165	179	84	33	3660	106	71	22	2770	85	36	18	1740	46	42	12
1903	4410	154	71	18	4200	175	95	35	3690	118	57	17	2810	88	34	12	1740	59	38	7
1904	4410	153	96	44	4244	144	111	38	3760	124	87	35	2822	89	37	18	1764	57	50	16
1905	4525	160	62	18	4367	152	97	29	3903	118	64	14	2900	86	34	13	1800	61	36	14
1906	4600	159	66	21	4470	205	81	31	4010	143	66	19	2920	82	38	15	1800	71	49	12
1907	4640	156	65	14	4500	157	82	28	4310	148	60	19	2950	89	35	7	1600	60	44	10
1908	4714	147	70	25	4301	186	90	28	5026	193	78	24	2883	78	26	6	1658	69	48	19
1909	4785	176	54	16	4380	166	49	17	5100	183	76	17	2913	73	29	3	1680	69	46	9
Average of Years 1901 to 1909	4536	158	71	22	4301	170	84	29	4123	139	69	20	2857	87	34	12	1724	61	42	11
1910	4845	188	73	22	4380	162	74	21	5145	170	68	15	2950	60	36	6	1680	50	39	9

TABLE IV.

CAUSES OF, AND AGES AT, DEATH DURING YEAR 1910,
IN THE URBAN DISTRICT OF GOOLE.

CAUSES OF DEATH.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES.							DEATHS IN LOCALITIES.					Deaths in Public Institutions.
	All Ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	North.	South.	East.	West.	Central.	
Small-pox	3	..	3	..	..	..	..	..	..	..	2	1	..
Measles .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever	1	..	1	..	..	..	..	2	3	1	1	..	1
Whooping Cough ..	6	..	..	6	..	..	..	..	..	..	..	..	..
Diphtheria and Membranous Croup	..	..	..	..	..	..	..	..	..	..	..	..	..
Fever { Typhus .. .. .	..	..	..	..	..	..	..	..	2	..	..	..	..
{ Enteric .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
{ Other Continued ..	2	1	..	..	..	..	1	..	..	..	..	..	..
Epidemic Influenza ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague	14	9	5	..	..	..	..	2	3	3	1	5	..
Diarrhoea	1	1	..	..	..	..	..	3	..	1	..	..	..
Enteritis	3	2	..	..	..	..	1	..	..	..	..	..	1
Gasritis	1	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever	2	..	..	..	..	1	1	1	..	..	..	1	..
Erysipelas	20	1	1	..	3	15	..	4	6	6	1	3	2
Phthisis (Pulmonary Tuberculosis)	14	6	6	1	1	..	..	3	8	2	1	1	1
Other Tubercular Diseases ..	21	..	..	..	..	14	7	4	5	7	3	2	..
Cancer, Malignant Disease ..	23	8	4	..	..	1	..	4	4	8	2	5	1
Bronchitis	29	9	7	3	2	8	..	11	3	4	2	4	1
Pneumonia	1	..	..	..	..	1	..	..	1	..	..	..	..
Pleurisy .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Diseases of Respiratory Organs ..	1	..	..	..	..	1	..	..	..	..	..	..	1
Alcoholism, Cirrhosis of Liver ..	11	11	..	..	..	..	..	5	3	2	1	..	..
Premature Birth	4	..	..	..	..	4	..	9	2	2	7	2	4
Diseases and Accidents of Parturition ..	25	2	1	..	1	13	11	2	3	6	..	1	4
Heart Diseases	8	..	..	..	2	3	..	..	..	2	..	1	..
Accidents	1	..	..	..	..	1	..	..	..	..	..	..	..
Suicides .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Old age .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken Pox	99	23	5	5	3	20	33	23	25	24	16	11	14
All other causes .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..
All causes	290	73	33	15	12	93	64	73	74	63	36	39	31

Infantile Mortality.

The total number of deaths under one year of age is 73, or 115 per 1000 births registered, compared with 62, or 93 per 1000 births registered during the previous year. This number is higher than the preceding year, although it holds the same position relatively to the total number of deaths.

The infantile mortality rate for England and Wales during 1910 is 106 ; 115 for 77 great towns, and 104 for 136 small towns.

The average for the past 10 years is 94, or 155 per 1000 births registered.

In 1900 there were 76 deaths, or 131 per 1000 births.

1901	„	95	„	145	„
1902	„	106	„	188	„
1903	„	89	„	149	„
1904	„	151	„	266	„
1905	„	88	„	152	„
1906	„	98	„	148	„
1907	„	78	„	127	„
1908	„	102	„	151	„
1909	„	62	„	93	„

It was almost too much to expect that the abnormally low rate for 1909 would be continued ; fortunately the increase is not a very great one, still it is much greater than we should like to see it.

Practically these deaths were caused as follows :

Diarrhœa	..	...	...	13 deaths.
Premature birth	...	...	11	„
Wasting diseases	...	...	18	„
Tuberculous diseases	...	...	7	„
Bronchitis and Pneumonia	...	...	17	„
Overlaying...	...	...	2	„

Comparing these figures with 1909, there were : —

1	deaths from Diarrhœa.
14	„ Premature Birth.
5	„ Wasting Diseases.
5	„ Tubercular Disease.
19	„ Bronchitis and Pneumonia.
1	„ Overlaying.

It is at once apparent that the increased number is due firstly to diarrhœa, and secondly to wasting diseases.

The deaths due to diarrhœa took place in the autumn of the year, and ought to be preventible. Probably it is one of the penalties we pay for being largely a box-closet town. The opinion is now held that in hot weather flies contaminate the food of infants and so cause this disease. We all know their favourite habitats, hence the necessity for wholesome sanitary surroundings, and the unsatisfactory state of affairs which necessitates the retention of

excretal matters around dwellings. Until we receive our new Sewage scheme it is impossible to prevent this, remembering that of the total number of houses 3830 are box closets, and only 710 water closets.

As surely as another hot year like 1904 comes round, so surely will our deaths from summer diarrhoea mount up.

Secondly with regard to deaths under the heading of wasting diseases. In 1909 only 5 deaths were registered as caused by Atrophy, Debility or Marasmus, whereas in the year under review there were 18 deaths under this heading.

These terms imply that the child has died from mal-nutrition, which may be caused by improper feeding, unwholesome sanitary conditions, or due to inheritance. We continued the distribution of cards containing advice on the bringing up of infants, and in the case of deaths under both headings inspections were made as to the sanitary conditions existing at the homes

In this connection a warning note is necessary. Professor Karl Pearson, in a recent lecture on "Nature and Nurture, the problem of the future," asks the question: Is nurture or nature responsible? Do wretched homes produce degenerate stock, or degenerate stock wretched homes? Does the health of the children depend more on the physique of their parents, or on their home environment? But if we assume that any profitable result could flow from the vague answer that social evils are in part due to nurture and in part due to nature, have we ever acted upon this answer? Have we not for the last seventy or eighty years devised all our social reform on the conception that we had but to improve the environment, to better the nurture of the nation, and we should progress indefinitely? Has not the assumption that nurture, not nature, is the chief factor in national progress been the key to all social legislation, to Factory Acts, Building Acts, Sanitation Acts, Education Acts, and a multitude of other enactments devised to raise the state of the people."

"Now, I will not dogmatically assert that environment matters not at all, phases of it may be discovered which produce more effect than any we have yet been able to deal with. But I think it will be safe to say that the influence of environment is not one-fifth that of heredity, and quite possibly not one-tenth of it. There is no real comparison between nature and nurture, it is essentially the man who makes his environment, and not the environment which makes the man. There is very definite evidence to show that the terrible fall in our birth-rate since 1877 has been a differential fall. It is a fall which concerns chiefly the fitter members of all classes. The fitter of all classes, from the artisan to the executive, have fewer and fewer children, but the unfit maintain their old numbers; nor is the reason hard to seek, income and wages are no longer proportional to physical or mental fitness. The man and woman who cannot afford to marry are now taxed for

the education, the sanitation, the medical provision, and very often the nutrition of the offspring of those who ought not to marry. The policy of bettering the environment has been carried out regardless of the fact that it has checked the reproduction of the essentially abler and more desirable members of the community."

Arranged according to Wards these deaths were distributed as follows: North 22, South 21, East 15, West 6, Central 9.

But a better comparison is the infantile mortality rate, i.e., the number of deaths stated in proportion to the number of births in each Ward and expressed per 1000. This gives us an infantile mortality rate of

180 in the Central Ward.

129 ,, South ,,

117 ,, North ,,

100 ,, West ,,

92 ,, East ,,

so that the East Ward has displaced the West Ward in regard to deaths under 1 year of age, and the Central Ward still has a very high infantile mortality, and presents a very unfavourable contrast with the other Wards. It is in the Central and South Wards where there are so many underground living rooms. Probably this has something to do with the high death rate in these two Wards, although it is not a fair comparison to compare these two Wards with the East and West Wards. Here we not only have better dwellings, but the population is composed of those in distinctly better circumstances, and certainly their infants would never lack food, and this would be of a suitable character, whereas in the Central and South Wards reside our poorer population, many of whom cannot so well afford their children all the comforts that their richer neighbours can, and further probably "the material" is not so good. Again, "Briefly is nurture or nature responsible?"

Of the 29 illegitimate births in the year 4 died.

The Notification of Births Act, 1907, has not been adopted by the Council, and no health visitors are employed. We have continued the distribution of cards on the rearing of infants to the parents of every child born during the year, and in the case of deaths enquiries were made as to the sanitary condition, &c., of the homes.

Seeing the great strides that are being made in the prevention of tubercular diseases, the time may be near when a lady health visitor will be appointed by the Council to undertake visitation at the homes. This is the direction in which further efforts of the Health Department should be exercised, and presents a wide scope for usefulness, more especially as there exists a comparatively small amount of charitable and voluntary work amongst the poor and needy of the town. These then could be organised under a central body, including the poor law organisation and the various workers in connection with the different churches.

TABLE V.

INFANTILE MORTALITY DURING THE YEAR 1910.
DEATHS FROM STATED CAUSES IN WEEKS AND MONTHS UNDER ONE
YEAR OF AGE IN THE URBAN DISTRICT OF GOOLE.

CAUSE OF DEATH.	Under 1 Week.	1 2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total Deaths under One Month	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
Common Infectious Diseases—																	
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrheal Diseases—																	
Diarrhoea, all forms	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Gastritis, Gastro-intestinal Catarrh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wasting Diseases—																	
Premature Birth	6	3	...	1	10	1	...	...	...	...	...	...	...	...	...	...	...
Congenital Defects	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility, Marasmus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Diseases—																	
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Peritonitis: }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tabes Mesenterica }	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Causes—																	
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Influenza	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Deaths from all Causes	11	5	4	5	25	7	4	5	5	2	8	8	3	1	3	2	73

Population Estimated to middle of 1910—19,000.

Deaths in the Year of } legitimate infants 69.
illegitimate infants 4.

Deaths from all Causes at all Ages .. 290.

Births in the Year { legitimate 601.
illegitimate 29.

Infectious Diseases.

Return of the number of cases of infectious disease notified to the Medical Officer of Health during the year 1910, and of the deaths from the diseases notified.

Notifiable Diseases.		Cases.	Deaths.	
Diphtheria	...	103	...	6
Scarlet Fever	...	14	...	0
Erysipelas	...	13	...	2
Enteric Fever	...	3	...	0
Puerperal Fever...		3	...	1
		136		9
Non-notifiable.				
Measles...	...	...	...	3
Whooping Cough		...	...	1
Diarrhoea	...	...	...	14
				18

Giving a zymotic death-rate (the death-rate from the seven principal Zymotic diseases, namely, small-pox, measles, scarlet fever, diphtheria, whooping cough, fever, and diarrhoea) of 1·2,

In 1902 the rate was	2·6	In 1906 the rate was	3·1
1903	1·3	1907	1·4
1904	6·5	1908	3·7
1905	1·8	1909	0·9

The Zymotic death-rate for England and Wales is 0·99 ; 1·23 for 77 large towns, and 0·88 for 136 small towns.

TABLE III.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1910,
IN THE URBAN DISTRICT OF GOOLE.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.				No. of CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.							
	At Ages—Years.							North Ward	South Ward	East Ward	West Ward	Central Ward	North Ward	South Ward	East Ward	West Ward	Central Ward	Rural	Total cases removed to Hospital.
	Under 1	1 to 5	5 to 15	15 to 25	25 to 65	65 and upwards													
Small Pox ..	..	..	..	..	..	..	23	46	17	13	4	20	38	8	9	8	..	..	83
Cholera ..	..	..	..	..	..	..	5	1	3	2	1	3	..	..	..	..	..	..	..
Diphtheria (including Membranous Croup) ..	103	24	70	3	6	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	13	1	1	..	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever ..	14	1	8	3	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhus Fever ..	..	..	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever ..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Relapsing Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever ..	3	..	..	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pulmonary Tuberculosis Poor Law ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pulmonary Tuberculosis Voluntary Notification ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ..	136	26	81	7	19	3	31	48	31	19	7	23	38	12	10	8	..	..	91

Isolation Hospital—Joint Hospital, Hook. Total available Beds—26. Number of Diseases that can be concurrently treated—3

Diphtheria.

103 cases of this disease were notified during the year. This is an increase of 15 over the previous year. We had hoped for a better record than this. Fortunately the death rate continued a very low one, less than 6% in contrast with a stationary 10% at the Metropolitan Asylum Board's Hospitals.

It was in the South Ward mainly where the greatest incidence of the disease occurred. It will be remembered with what success we were able to stamp out the disease when centred round the Church schools. And this condition of matters continues. We were unable to get the same amount of assistance to deal with the Old Goole schools, with the result that we were never really able to master the disease in this district, and cases kept cropping up more or less during the whole of the year.

Criticism has occasionally taken place of our methods of dealing with "contacts." In this connection I append the following extract from "The Medical Officer," of January, 1911, as to the method adopted by the Chicago Health Department to check the spread of diphtheria: "The practice is to culture all throats in a schoolroom to which a case of diphtheria has been traced. Any school child so cultured, found to have diphtheria germs in the throat is quarantined at home until a subsequent culture proves negative. None but the 'carriers' are quarantined, other children in the family being allowed to go to school. Visitors in the home are prohibited, and a special warning card is posted on the front and rear of the house or apartment. The card is white, on which is printed in large letters: 'Carrier of diphtheria here; keep out'.

"Below this on the card is printed matter explaining the requirements of the department in the case, as follows: A diphtheria 'carrier' may not be sick, but has diphtheria germs in the throat, and can spread diphtheria. Such persons will be required to stay in the house until the throats are free from germs. Cultures will be taken to determine this. Other persons in the house can go in and out. Neighbours and friends must stay out. Milk men must take the usual precautions. These rules must be obeyed until this warning card is taken down by the Department of Health.

"A printed slip is handed to the family, which reads as follows: 'Department of Health—City of Chicago. Instructions for Parents in cases of diphtheria carriers. A microscopical examination of a culture from the throat of your child shows the presence of diphtheria germs. The child may not fall sick, but diphtheria germs are dangerous to anyone having them in the throat and to others as well.

"For the safety of the child and other members of the family you should have your doctor use something to destroy the germs now in your throat. Do not take the child to the doctor, call the doctor in or see him yourself. Cultures will be taken from the throat to tell when it is safe.

“For the safety of the neighbourhood the Department of Health will require the child to remain in the house until the throat is free from germs. Other persons living in the home can go in and out. Neighbours and friends must be kept out of the house. The milkman must take the usual precautions.

“These rules must be obeyed until the warning card is taken down by the Department of Health.”

Our methods have been and are on similar lines, though not quite so drastic, as the following leaflet will show, and which is sent to the home of every “carrier.”

“Health Department. Urban District Council of Goole.

“DIPHTHERIA.

“Name..... Address
who has been in contact with a patient suffering from Diphtheria is advised that, as a result of the examination of..... throat, which shows the presence of disease germs..... should consult. Doctor and obtain an antiseptic gargle for the throat. Further. should avoid intimate contact with others, such as kissing, &c., and should use her own cup, knife, &c., and not attend school until further notice.

“N.B.—Please show this paper to your Doctor and the School Attendance Officer.

“A. M. ERSKINE, M.D., Medical Officer of Health.”

We do not use the word “must” quite so much, and we have not the staff to detect the “carriers” such as a larger town would have, hence we only find the immediate “contacts,” and must perforce allow the more remote to pass unrecognised. Further, since we only use persuasive measures occasionally our preventive measures are neutralised by those who will not permit their children to have their throats cultured, as instance a recent case where a child presumably received the infection at a children’s party, and where three out of the total were not allowed by their parents to have their throats swabbed.

In September and October the disease threatened to overtake us, and I made a special report to the Council, and asked for the services of a nurse specially qualified to do this work, the request was acceded to and the result was most gratifying.

So far as we could no stone has been left unturned to get rid of the epidemic.

The following brief extracts from my monthly reports will illustrate the history of the epidemic during the year under review :

10 cases notified during January.

9 “ “ February.

6 “ “ March.

An analysis of recent contact lists shows that on March 1st at the Catholic School out of 15, 1 was positive.

March 7th, at Boothferry Road Schools out of 8, 1 was positive.

March 9th, at Old Goole Schools out of 10, 1 was positive.

March 14th, at Boothferry Road Schools out of 17, 3 were positive.

These four instances are an example of how the disease is continued by means of "carriers."

During April, 6 cases were notified, and were situated round two centres, Boothferry Road Schools and Old Goole Schools. The history of one contact was that on April 29th she was in attendance at Boothferry Road Schools, and was returned positive. Several more positive returns were obtained, and on my visiting her home I found she was suffering from nasal diphtheria, but was having no treatment.

During May, 10 cases were notified. All the schools were closed from May 13th to May 23rd, and during this period no notifications were received, and this continued up to June 2nd.

Only 4 cases were notified during June, and 5 during July.

The schools were closed for the summer holidays from July 22nd to August 22nd

For August, 9 notifications were received, and I reported as follows: The first was a girl aged 12, from Beverley Street, who was treated at home, and as a result isolation was very unsatisfactory. She was notified on the 6th inst. The remaining cases form a series. On the 23rd a child from South Street was notified. At her back door a playmate was notified on the 25th. Two more children from the same house were notified on the 29th, and two more children were notified on the 27th and 29th out of the same class at school.

During September there were 10 cases centred round Boothferry Road and Old Goole Schools.

With the month of October began the seasonal incidence of the disease, as it is a well recognised fact that "Diphtheria belongs, like scarlet fever and enteric fever, to the group of diseases whose maximum prevalence is in the autumn of each year."

For the month of October 16 cases were notified. On the 5th October I asked for permission to appear before the Finance Committee, and reported as follows:—On September 23rd, 24th, 25th, 28th, October 3rd, 4th and 5th, notifications were received, and were centred round the Old Goole and Boothferry Road Schools. Remembering the striking success obtained at the Church Schools last year, when by a thorough and systematic examination of all the scholars attending these schools we removed completely what had been for years a centre of infection, and this immunity still continues.

The time appears opportune to attack these two centres in the same thorough manner. Of the three latter cases, the notification on the 5th was that of a boy very ill, and actually in attendance at school during the forenoon. The notification on the 4th was the child of a milk dealer, who died the same day. The case on the 28th September was infected through her sister, a school child, employed

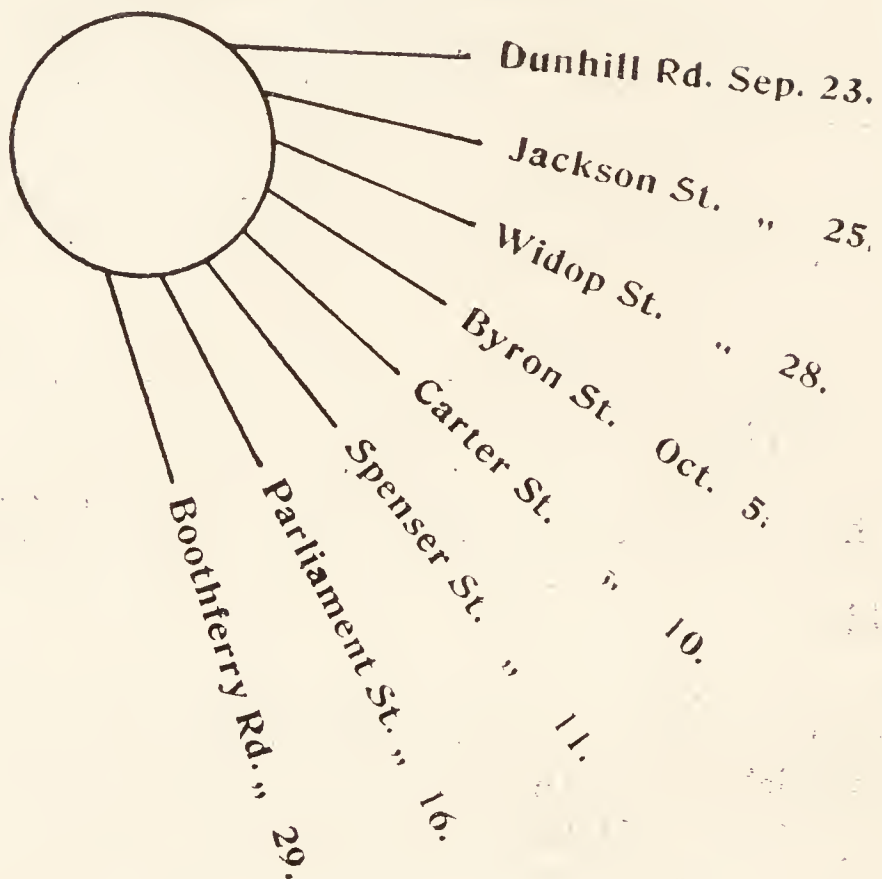
in a workshop, and finally when I examined the boys at Boothferry Road Schools I found a lad actually at school suffering from the disease, which was confirmed later by bacteriological examination. These were the grounds on which I based my request for a nurse to be engaged with special qualifications and experience in dealing with diphtheria contacts. We had previously been able to keep the disease well in hand, but now it threatened to overtake us, and particularly so as the schools were in full swing, and it was the period of the year when the disease was most prevalent. The request was granted, and the subsequent history is as follows :

On the 7th a notification was received from the East Ward, who was a teacher at the Old Goole School. As illustrating further how the disease might be spread, she had a brother attending the Secondary School, and a sister in a workshop amongst other girls. On the 10th three notifications were received, one of which introduced a new centre of infection, i.e., Alexandra Street Schools which had hitherto been exempt.

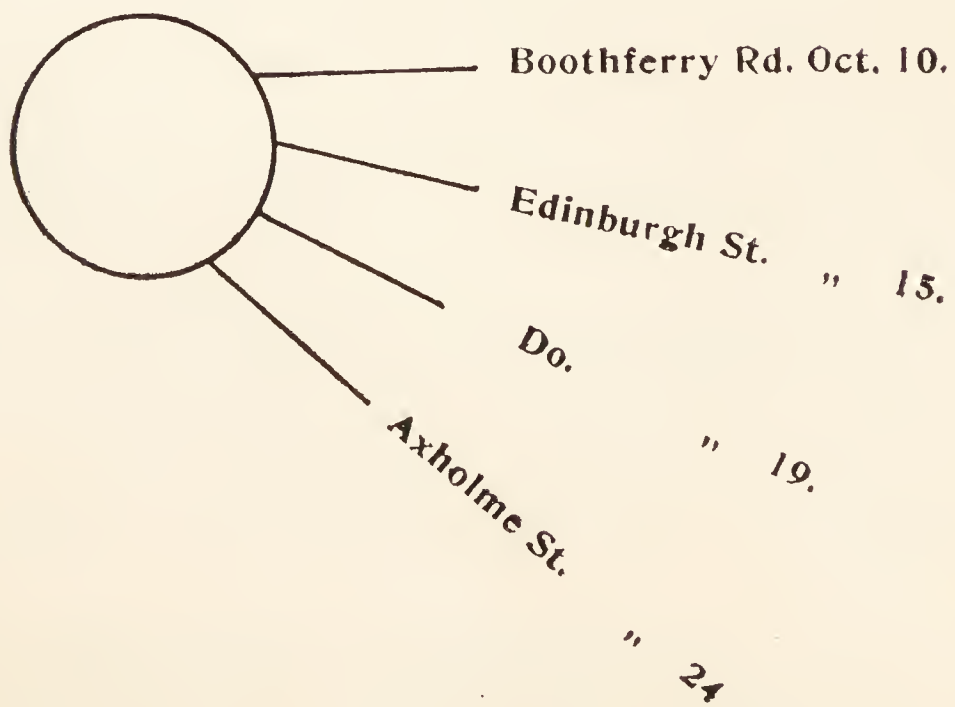
On the 11th another child from Boothferry Road Schools was attacked with the disease. Then on the 15th the mother of three children was stricken with the disease in the East Ward. Two of her children attended Alexandra Street School, and on the 19th another notification was received from next door, that of a child very ill and probably dying. Here the family consists of nine children, and the mother keeps a shop, and might readily have proved a fruitful centre of infection in a part of a town which had previously been free from the disease. The children here also attended Alexandra Street, and on my visiting there I found a child with discharging ears, which on repeated bacteriological examination was returned as positive. On this date also another notification was received from South Street (third case). The history of this patient was that her sister had been discharged from the Sanatorium a few weeks previously, and had since developed a nasal discharge. This proved on culture to be diphtheritic, and she was re-admitted into the Sanatorium.

The following diagram illustrates the foregoing remarks, and shows the centres of infection :

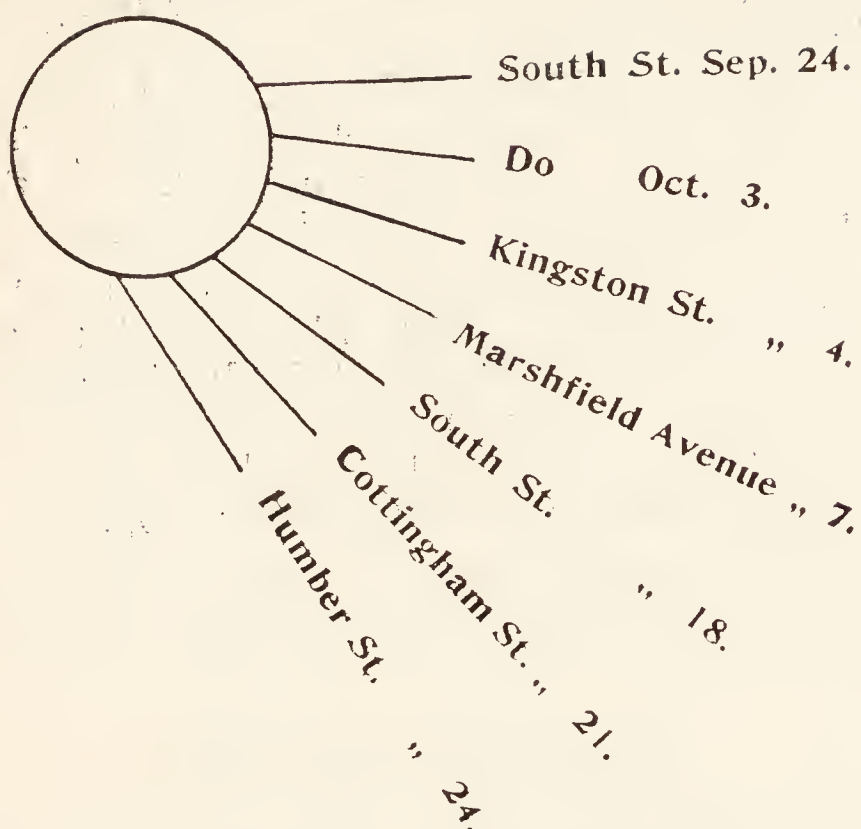
BOOTHFERRY RD. SCHOOL.



ALEXANDRA ST. SCHOOLS



OLD GOOLE SCHOOL.



The nurse was engaged for three weeks from the 7th October. She visited the three schools daily and the contacts at home as well as the homes of the cases notified. She visited 98 houses and took 111 swabs, 12 of which were returned as positive. She also visited for treatment three children excluded from schools by my order and suffering from discharging nose or ears, as we found that no attempt at treatment was being carried out.

In November there were 10 cases, and in December 8, practically all confined to the South Ward and to children attending the Old Goole Schools. Amongst these one proved fatal within 24 hours from the onset, and in another instance three children remained together daily at school during the hour for dinner instead of going home, as one of them lived in the country, and all three were chums. They were all seized with the disease.

The following letter received by me from Dr. Temperton, one of the school Medical Inspectors, forms an interesting commentary on the foregoing remarks, and well illustrates the difficulties we have to contend with in dealing with the disease :

"In the Boys' department of the Old Goole Council School I came across a boy who had 'sore throat' early in the month, and was off school for a week, and has been attending school since. For the last few weeks he has had marked nasal speech and he occasionally has regurgitation of fluids down the nose when he is drinking—Paresis of the soft Palate. An older child had a 'sore throat' very soon after this boy, and another child in the family had a 'sore throat.' In both cases they were off school for about a week, and have been attending since. There are four other children in the same family."

There is no doubt that all these children had diphtheria and were the means of giving the disease to a good many others. When I saw the first mentioned boy he had very characteristic diphtheritic paralysis, as a result of his "mild attack." But it is these mild cases which spread the infection. Such a history is sufficient to account for a whole school being infected, and the success of preventive measures depends upon finding them out.

The Council adopted the Orders of the Local Government Board dated August 15th, 1910, with regard to the supply of Antitoxin for the poorer inhabitants of the district, and arrangements were made accordingly, but up to the present no request for a supply has been made, the main reason for this being that we give every facility for prompt removal of the patient to hospital.

In contrast with diphtheria we have been remarkably exempt from other cases of notifiable infectious disease, as witness Table III. Only 14 cases of scarlet fever and 3 cases of enteric fever notified.

Epidemic Diarrhœa.

There were 14 deaths from summer diarrhœa during the year, compared with four deaths during the preceding year. These deaths were registered during the short period of fine weather experienced in the late summer.

Measles.

Three deaths were caused by measles. In May I reported that a mild epidemic of measles was present amongst the children attending Alexandra Street Schools, and "Precautions" were distributed to the children attending these schools. I made frequent visits to these schools, and acted upon the County Council's instructions of only excluding those children who gave clear evidence of not having had the disease. The epidemic spread from the East Ward to the North and West Wards, i.e., to the children attending Boothferry Road Schools, and at one period the attendance at the Infants Department was as low as one-third of those on the register. A few cases arose at the Secondary School, and after consultation with the Head-Master the same course was adopted. The epidemic was of a comparatively mild character, and with the closing of the various schools for the summer holidays the epidemic died out. It was suggested that I should have asked for school closure, but the result justifies my not doing so.

Scarlet Fever.

We continue to enjoy a remarkable immunity from scarlet fever in comparison with the experience of other towns. Although 14 cases were notified they were isolated instances, and no extension of the disease took place, and no deaths occurred.

Enteric Fever.

Three cases were notified, with no deaths. In one case in the West Ward the history pointed to the partaking of mussels as the probable source of infection.

Cancer.

There were 21 deaths from cancer, compared with 14 in 1909, 9 in 1908, 13 in 1907, 14 in 1906, 14 in 1905, 6 in 1904, 25 in 1903, 12 in 1902, 7 in 1901, and 6 in 1900.

Puerperal Fever.

There were 3 cases notified, with one death. The administration of the Midwives' Act is exercised through the County Council.

Tubercular Diseases.

Twenty deaths were caused by consumption, and 14 by other tubercular diseases, making a total of 34 deaths from tubercle, and giving a death rate from the diseases caused by tubercle of 1·7, compared with 1·6 in 1909, 1·9 in 1908, 2 in 1907, 2·1 in 1906, 1·6 in 1905, and 2·4 in 1904.

The death rate from consumption alone is 1 per 1000, compared with ·9 in 1909, ·9 in 1908, 1 in 1907, 1 in 1906, ·5 in 1905, and ·8 in 1904.

This is the second year of the system of voluntary notification of consumption, and under this heading 14 patients were notified, and 3 under the Poor Law regulations.

Arranged according to Wards the deaths from tubercle were as follows: 7 in the North Ward, 8 in the East Ward, 4 in the Central Ward, 14 in the South Ward, and 1 in the West Ward.

In the case of every notification a visit to the house of the patient was made, and a card containing precautions left. In addition enquiries were made as to the social well-being of the patient, and suggestions made towards the prevention of infection. In every instance where a death took place the rooms were thoroughly disinfected.

During the year seven carcasses and 10 parts of carcasses were destroyed for tuberculosis. Several samples of milk were sent for bacteriological examination, but in no instance were tubercle bacilli found.

The diseases caused by tubercle are now recognised as preventible, and since our death-rate from this cause alone is 1·7, being a higher death-rate than that caused by the seven principal infectious diseases grouped together, the problem of the control of tuberculosis is a very important one.

Seeing that we have no hospital accommodation for cases of pulmonary tuberculosis, and since the Council has not signified its intention of joining in the County Council scheme for a sanatorium I would reiterate my former suggestion that our small-pox hospital be utilised for this purpose. The treatment would not cease here. After a few months residence the patients would be discharged and visited at their homes for further treatment and supervision. What is described as the the tuberculin treatment for consumption is rapidly gaining ground, and very favourable reports are given of its effectiveness. At a recent meeting of the Leeds Medico-Chirurgical Society, Dr. Trevelyan gave the results of the treatment in 600 cases. The report was very convincing. Tuberculin dispensaries are now being established in different parts of the country, and encouraging reports are given of their success.

The control of consumption consists not in an expensive sanatorium *per se*, and afterwards sending the patient out to what is very often unsatisfactory home conditions. At the onset of sanatorium treatment the opinion was often expressed that it was a cure for consumption. Emphatically this is not so, and unfortunately consumption is only curable in a small percentage of cases. What is gained by sanatorium treatment is amelioration of the patient's condition, teaching him to lead a healthy life, and instructing him in the prevention of the spread of the disease to others. We are concerned principally with the prevention of the disease. This requires a few months residence in hospital, and afterwards visitation of the patients at their homes to see that they are living or (if able) working in hygienic surroundings. Visitation further will find out the early cases, which are the most favourable ones for cure. It is by a combination of such methods that the disease will be stamped out.

Present-day experience and the trend of modern thought is against large and expensive institutions as a means of eradicating disease, but rather to reach the people in their homes and improve their condition of living. I hope before long to see such a scheme in operation in Goole, our present system of notification is only a beginning, leaflets of instruction may aid a little, but don't go very far. Such a scheme as I have briefly outlined appears to be the proper method of attacking the disease and helping the sufferers.

At a meeting of committee to which this report was presented, a resolution was passed unanimously appointing a sub-committee to confer with a similar committee appointed by the Guardians to consider this subject

As our Infectious Hospital belongs to these two authorities jointly, has a good situation, has been recently built on the pavilion plan with verandahs, and has large grounds, I would suggest that sufferers from consumption belonging to the Urban and Rural districts be admitted for treatment. This could easily be done when there were few cases of infectious disease, and without any

increase of the staff, and practically there would be no risk of cross infection, the pavilion plan aiding in this respect. The only extra expense would be feeding and the cost of tuberculin.

Of course when the hospital was required for cases of notifiable infectious disease the consumptive patients would be discharged ; but experience shows that for a good many months of the year the hospital might quite easily be further utilized on the lines suggested, and at a relatively small extra cost. The experience of those dealing with consumption is very strongly in favour of the benefit derived by even a few months hospital treatment and exponents of the tuberculin treatment assert that by this method patients are enabled to continue at their work even when a cure is not effected.

The Council would be well advised to give the scheme a trial, as it offers great possibilities, not only for the prevention of the disease, but also in aiding the sufferers, and ultimately eradicating the "great white plague" altogether.

Inspection of Meat.

There are two slaughterhouses in the district, one public and the other private. They are visited regularly by the Inspector at the times of slaughtering, who does not, however, hold a special certificate in meat inspection, but has had a long experience. Seven carcasses and ten parts of carcasses were found to be tuberculous, and destroyed by fire.

VACCINATION RETURN FOR THE PERIOD JANUARY TO JUNE, 1910.

Births registered	326
Successfully vaccinated	185
Statutory declarations of conscientious objection	100
Dead—unvaccinated	27
Postponement by Medical Certificate	8
Removed to districts Vaccination Officer of which has been duly apprised ...	2
Removed to places unknown, and cases not having been found	4
	<hr/> 326 <hr/>

Statutory declarations of conscientious objection actually received by the Vaccination Officer during the calendar year 1910	216
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SUPPLEMENTAL RETURN FOR THE PERIOD 1st JANUARY TO 31st DECEMBER, 1909.

Births registered	706
Successfully vaccinated	465
Statutory declarations of conscientious objections	159

Dead—unvaccinated	...	...	...	...	41
Postponement by Medical Certificate	...	...	...	...	3
Removed to districts Vaccination Officer of					
which has been duly apprised	...	...	...	...	5
Removed to places unknown, and cases not					
having been found	...	...	...	...	3
					<hr/> 706 <hr/>

Total number of certificates of successful primary vaccination at all ages received during the calendar year 1910 403

Housing Accommodation.

During the year under review there has not been such a dearth of houses for the working-class population as existed during the preceding year, indeed one has seen several bills "To let" exhibited. Building operations have been fairly active, there being an increase of 72 houses in occupation compared with the previous year.

The new set of bye-laws for new streets and buildings is now in operation. The supervision over the erection of new houses rests with the Surveyor to the Council.

The Health Department has been successful in accomplishing several satisfactory improvements to old property by making personal application to the owners, and pointing out how this could be effected.

In Jackson's Yard the owner has pulled down the block to which we took exception, and renovated in a thorough manner the remaining cottages, the result being that not only has he effected a very striking improvement, but has increased the value of the houses left standing.

Also in Park Terrace the owner has handsomely met our views, and asphalted the surface all round this property, which is situated in the centre of the town, and is very convenient for respectable workers with families. The little children have only the vicinity of their own houses to use as a playground. They can now do so without having to suffer the inconvenience and penalties of wet feet, being in many instances not too well shod.

These remarks also apply to Wesley Square and Paradise Place.

Victoria Court we hope to see improved before long.

The pulling down of the houses and yards in Bridge Street and Doyle Street has been a blessing in disguise, compelling the inhabitants to find other homes. Fortunately this they have been able to do by a more modern type of dwelling.

I have made inquiries from the police authorities who inform me that since the Council's property in Mason Terrace and Edinburgh Street has been pulled down the statistics of crime in

this neighbourhood has been less, and also the Relieving Officer informs me that he has to distribute less relief. One hopes that it will be some time before the necessity arrives to rebuild.

I hope before next year's report is ready to be able to record that the Duckel's Buildings improvement is an accomplished fact.

We have done what we could with the Yards between Barge Dock Side and Vermuyden Terrace. This property is scheduled under the new Dock Extension Improvements, and many of the tenants are under short notices.

Back Streets.

Owing to the delay in the new sewerage scheme very little progress has been made towards paving the back streets of the town, but this should not prevent repairs being done to those already made.

Housing (Inspection of District) Regulations, 1910.

Several meetings of the Committee appointed under the above regulations have been held, and the procedure adopted to give effect to the requirements in regard to the inspection of the town.

The following premises have been scheduled as requiring early inspection :

Capstan Street.	Ouse Street and George Street
Foundry Lane.	(Cellar Kitchens)
Doyle Street.	Bromley's Yard.
Albert Street.	Mill Yard Cottages.
Back Heber Terrace.	Providence Place.
Back-to-back Houses in Old	Mason Terrace.
Goole.	Mongon's Tenements.
Bentley's Yard, Dutch River	Parrott's Yard.
Side.	Victoria Court.
Back South Street.	Widop Street.
Calder Square.	Chapel Street.

It was resolved "that the Medical Officer of Health be instructed to inspect and report on dwellings in such list, commencing in the South Ward, and proceeding with the Central Ward, under the headings as required by the Act."

The Inspector reports with regard to the following :—

Victoria Street, off Bridge Street, Whitaker's Yard.—A large common yard, which was in a very bad condition for want of paving. Surface water stood in large pools, and became foul and stagnant. The drains were defective and choked, the roof spoutings were broken and downfalls choked. The roofs of the outer buildings were leaky, the street footpath was also below the level of the road, which caused the surface water to stand to a depth of five or six inches. All these defects have been remedied, and a decided improvement made to the property.

Hunter's Yard, Rear of 70, South Street.—In this yard, which is used in common by all the tenants, a large-sized wash-house and other buildings were erected near to the kitchen windows and back doors of two houses. This prevented the tenants opening their kitchen windows for ventilation, and also cleaning same. Closet accommodation was also insufficient. Many of the house windows, including bedrooms were fast, and others were much out of repair, the yard paving was defective, and the property generally out of repair. The old buildings have been pulled down, windows re-constructed and made to open, extra closet accommodation provided, and all other defects remedied.

Spilman's Yard, next to Hunter's Yard, rear 66 South Street.—In this yard, which is used in common by all the tenants, the drainage was defective, yard paving bad, fast windows, broken doors, damp kitchen walls, and several minor nuisances, all of which have been remedied.

Bentley's Yard, Quay Street.—The condition of this yard was very bad. The outer buildings (roof, doors and brickwork) were decayed and in a tumble-down condition. A large wash-house, used in common, had neither door nor windows, and could not, therefore, be used in bad weather. These matters have received attention, and the property is in much better state of repair.

Colbridge's Yard, opposite to the above yard.—The outer buildings connected to this property were in a dilapidated and tumble-down condition, roofs and spoutings defective, and general repairs required to put the property in a more sanitary condition. This has been done, and improvements effected.

Rowbottom's Yard, near the Ferry Boat Inn.—In this yard there were many old and disused out-buildings without doors or roofs. This encouraged the tenants and outsiders to deposit garbage and all other refuse into them, which became offensive. The roof spoutings and downfalls were out of repair, and the yard paving the same. The old buildings have been pulled down, a new dust-bin built for refuse, damp cellar kitchen floor cement concreted, spoutings and yard paving repaired, and the property put into a more sanitary and habitable condition.

88 and 90, South Street, and 55 and 57, Back South Street.—Connected to this property were two large ash-pits, used in common by a number of tenants. The walls were decayed and heavily saturated with dampness, and the pit bottom much below the surface level of the passage. The paving was also defective. The pits have been abolished, and the closets provided with galvanized iron soil-boxes, which are emptied weekly. The yard paving has also been repaired.

9 and 10, Dutch River Side.—Two large ash-pits have been abolished and W.C.'s provided, also new drainage provided for same, with a suitable and convenient examination chamber.

Rear of 72, Swinefleet Road.—A large open ash-pit has been demolished, and a water closet fixed in place, also a suitable examination chamber built in the drain.

9 and 11, Boothferry Road.—Three large and offensive ash-pits have been demolished, and galvanized iron soil-boxes provided, also the yard paving repaired. A suitable and wide footpath has been made for the convenience of the tenants, and the passageway leading from the front to the rear has been asphalted.

Within the last few weeks at least 40 houses in the North Ward have been under repairs for improvements, viz.:—Defective sink pipes, decayed brick work and open joints near sink pipes, fast gully tops replaced with more up-to-date covers, roof spoutings and down-falls repaired, and in several cases the yard paving has been repaired, besides three examination chambers built to drains.

The Diphtheria Antitoxin (Outside London)

Order, 1910.

Under this Order the Council has made provision for a temporary supply of diphtheria antitoxin for the poorer inhabitants of the town.

In accordance with this provision a circular letter was sent to all the medical practitioners in the town, notifying them of the fact.

Water Supply.

The water supply of the town is derived from public service, having for its source the new red sandstone at Pollington. An ample supply is obtained, wholesome in character and free from risk of pollution. There is no liability to plumbo-solvent action.

Milk Supply.

In the samples of milk taken during the year for analysis, a higher standard has been observed. Year by year less milk is produced within the district, the larger proportion being imported from the rural district area. Several samples were taken for examination for tubercle bacilli, and in every instance with a negative result.

Sewerage and Drainage.

The scheme for dealing with the sewerage of the town on the "Shone" system has been discarded, and a new sewerage scheme prepared by Messrs. Taylor, Sons and Santo Crimp adopted. The principle is that of gravitation to a certain point i.e., Pasture Road, and then to be pumped up and discharged into the river at Westfield Bank. The scheme is adequate to deal with the present and future requirements, and is made to embrace the whole urban area. A beginning is expected to be made early in the new year.

Although we are not a water closet town yet we enjoy a remarkable immunity from enteric fever. Still the retention of fæcal matter around dwellings is not at any time an ideal state of affairs. Other diseases such as summer diarrhœa are propagated by this means, and we are looking forward to the time when water closets can be substituted for the present system of box closets. This can only be effected as we get our new sewerage scheme into operation, under present conditions it is not possible to do so.

At the end of the year there were approximately :

- (a) 4,500 houses in occupation.
- (b) 710 of these had water closets.
- (c) 3,498 had pail closets.
- (d) 332 had ash-pits or privy-middens.

Sewerage Scheme.

Extracts from the Report by Messrs. John Taylor, Sons and
Santo Crimp, on Goole Sewerage Scheme.

SYSTEM OF DRAINAGE AT PRESENT IN USE.

“ (1) The peninsula comprising the area within the Goole Urban District, together with the adjoining parishes of Hook and Airmyn, is characterised by being extremely flat, and lying at a level somewhat below high water mark of ordinary spring tides. Being so circumstanced, it is evident that a free outlet for the discharge of the rainfall and sewage into the River Ouse cannot, at certain times, be obtained.

In the past, when the town of Goole may be said to have been first founded by the Aire and Calder Navigation, a system of drainage was adopted which comprehended the storage of both the rainfall and sewage waters in large sewers during periods of tide-lock, and the Navigation constructed at their own expense certain sewers on lands belonging to them, which were at that time of sufficient capacity to store the sewage and rainfall during tide-lock.

As the town extended, however, it became evident that the storage capacity provided on the Navigation property, though sufficient for the needs of the property itself, would be inadequate to store the additional rainfall and sewage accruing from the extended town.

In 1881, when the Goole and District Gas and Water Act was obtained, an agreement was scheduled to that Act which provided, among other things, that the then Local Board should construct all new main sewers which were thereafter to be connected with the sewers constructed by the Navigation, of a size not less in section than 5ft. high and 3ft. wide, a continuation, in fact, of the Navigation tank sewer scheme.

The terms of this agreement were not adhered to by the Local Board, sewers of much smaller capacity being laid, and connected with the Navigation sewers.

If the additional main sewers had been constructed of large dimensions, they might possibly have afforded sufficient storage to prevent flooding during periods of tide-lock, but owing to the physical

characteristics of the ground, any such sewers would require to have been laid practically without fall, or their invert would soon have become too high to drain the newer parts of the town.

PRESENT SYSTEM INADEQUATE AND INSANITARY.

(2) The science of sanitation has, however, much advanced since the Goole and District Gas and Water Act was passed, and, we may add, with material advantage to the general health of the community at large.

At the present time, the construction throughout a town of sewers of large diameter for the storage of sewage and rain water is considered insanitary, as, owing to the ponding of the water during periods of tide-lock, such sewers becoming settling tanks, and the solids and other matters contained in the sewage are deposited and remain therein. In such case the liquid, as well as the solids, both rapidly putrefy, with an accompanying evolution of noxious gases.

It has now been proved beyond doubt that the only sanitary method of draining a town, where the water carriage system is adopted, is by constructing a series of comparatively small sewers laid at such gradients as will rapidly lead both liquid and solid sewage sent into the drains to a point where the whole can be dealt with, either by discharge into a large body of water or otherwise.

NIGHTSOIL DEPOSIT.

(3) At the period when the Navigation sewers were constructed, the whole of the nightsoil of the district was collected in pails and disposed of on land, and this system may be said to be generally in vogue in Goole at the present time, but, on the other hand, many of the better houses are now being provided with water-closets, and there can be no doubt that the town will gradually, in accordance with modern principles, become fully water-closeted.

We have already referred to the evils attending the temporary storage of sewage water in sewers of large diameter, and it is unquestionable that the insanitary condition of the tank sewers at Goole would be vastly increased if the town was fully water-closeted, and the addition of nightsoil became general to the system.

PRESENT INADEQUACY OF UNDERGROUND STORAGE.

(4) Apart, however, from the sanitary aspect, there can be no question that the storage capacity of the existing sewers has become quite inadequate for the requirements of the present built-over area, as during periods of heavy rainfall and coincident high tides, floodings take place at frequent intervals in some of the low-lying yards connected with the Navigation system of sewers, and, moreover, the sewage is from time to time backed up the Hook Drain on that system of sewers.

Under these circumstances it is evident that until the present system is entirely remodelled it would be inadvisable to make any further house or surface connections with the existing systems, and it follows, therefore, that any considerable extension of the built-over area of the town is for the time being impossible.

REMEDY FOR EXISTING STATE OF AFFAIRS.

(5) In order to put the town into a satisfactory sanitary condition, we are of opinion that the whole of the sewage water and night-soil must be removed from the existing storage sewers and otherwise disposed of.

PUMPING A NECESSARY FEATURE OF ANY NEW SCHEME.

(8) It has already been stated that sewers of comparatively small diameter, laid at satisfactory gradients, are necessary in order to effectively drain the town in a sanitary manner, and in these circumstances the levels of the sewers would, in the course of their passage through the length and breadth of the town, reach such a depth as to preclude the possibility of gravitating the sewage to the river even at low water, and, in consequence, pumping of some sort must be resorted to.

GENERAL LINES OF PROPER SCHEME FOR GOOLE.

(9) After a careful investigation of the district, we have come to the conclusion that there is no difficulty whatever in constructing a satisfactory and sanitary main sewer through the centre of the town which would act as a gravitating collecting sewer for the whole of the area, and into which the sewage of Hook could also be gravitated, if that village be included.

The nature of the subsoil in the district, as described to us, and which was visible in the excavations now being performed at the new dock, leads us to the conclusion that a gravitation collecting sewer, such as we have above suggested, could be easily and cheaply constructed. Its general course should be in a northerly direction, and a pumping station would be established at its termination at some point in the parish of Hook, probably in the vicinity of Long Lane.

From the pumping station the sewage could be discharged into the river at any convenient point, but probably an outfall near the North-Eastern Railway Bridge would prove most suitable.

We are quite aware that the depth of a main gravitation sewer such as we have proposed would be considerable towards its termination, but owing to the great thickness of the bed of clay underneath the warp lands, the construction of such a sewer would present no difficulties, and its cost would not be a serious matter.

METHOD OF COLLECTION OF SEWAGE.

(10) We are in entire agreement as to the necessity for the partial exclusion of rainfall from the proposed new system of sewers, bearing in mind the fact that the whole of the liquid received into the sewers has to be pumped, and the system of lading the branch sewers up the back passages between the houses, and receiving from the houses, in addition to their sewerage, only so much of the rainfall as falls upon the back roofs and back yards, is, in our opinion a sound and proper one.

EMPLOYMENT OF EXISTING SEWERS FOR RAINFALL ONLY.

(11) If the gravitation sewers proposed by us were adopted, then the existing sewers could be utilised for receiving the rain falling upon roads, the front roofs, yards, and other paved surfaces, and the present system of sewers could be extended for rainwater only.

It should be noted that the collection into the proposed system of sewers of limited portions of rainfall from back roofs and back yards, and its consequent diversion from the existing sewers, would materially relieve the existing system of a considerable quantity of rainwater, and in this way would tend to restore the usefulness of the existing sewers.

In the event, however, of the town extending, and the Hook Drain being culverted for a further considerable length of its course, it might in the future be found that the new system would not afford sufficient relief to the existing sewers.

In such case a pumping station, provided with gas engines and centrifugal pumps, would have to be erected near to the mouths of the existing outfall sewers, and the pumps would be set in operation on the few occasions during the year when flooding by rainwater only would be likely to take place owing to the coincidence of heavy rainfall and exceptionally high tide.

We may add that this contingency might never arise were a scheme on the lines we have suggested to be carried out.

DISPOSAL OF SEWAGE.

(12) Owing to the enormous volume of tidal water passing up and down the river Ouse, in our opinion there could be no objection to the discharge of the crude sewage of the district at the point we have indicated at all states of the tide. The enormous volume of water with which the sewage would be mixed would rapidly oxidise and render innocuous the organic matters contained in the sewage, and no nuisance would, in our opinion, be created."

Schools.

The public elementary schools of the town are under a separate Medical Officer, appointed by the West Riding County Council.

Their sanitary conditions, including water supply, is efficient.

No school closure was asked for during the year. Diphtheria and measles were the two diseases prevalent during the year in connection with school attendance.

Methods of Dealing with Infectious Disease.

On receipt of the notification of a case of infectious disease the house is at once visited, and if removal be desired this is effected with promptitude. After removal of the patient the house is fumigated. In regard to patients suffering from diphtheria all "contacts" have their throats swabbed, and the "contact" carriers followed up. The infected clothing is disinfected by steam at the sanatorium.

Isolation Hospital.

The new hospital at Westfield Banks for infectious disease was opened on the 11th March. It was constituted by order of the Local Government Board, appointing the Goole Urban Council and Goole Rural Council a Joint Authority for the purpose of providing a new hospital for infectious disease.

The buildings consist of four blocks: administrative block with discharge rooms, laundry and disinfectory, and two ward blocks, in each of which is a single ward for doubtful cases, which can be approached either from the inside of the building or by a separate external door. At the south end of each ward block is a verandah for the benefit of convalescents, and another at the sides.

Provision exists for twenty-six beds, and three diseases can be treated concurrently. The drainage is dealt with by means of a septic tank, and the effluent is distributed in the grounds, for which ample provision has been made. The hospital has been built and fitted up in a most efficient manner, and according to modern requirements. The area of the field (belonging to the Joint Board) on which the hospital is built is $7\frac{1}{2}$ acres.

A caretaker and his wife live at the hospital, and the staff consists of a matron, charge nurse, and three probationers, with ward and laundry woman.

During the year 102 patients were admitted to hospital, 92 from the Urban District, and 10 from the Rural District. Of these: 9 were cases of scarlet fever; 89, diphtheria; 3, enteric fever; 1, measles. There were 6 deaths, all from diphtheria.

BIRTHS, DEATHS, AND NOTIFICATIONS IN EACH WARD.

	NORTH WARD.			SOUTH WARD.			EAST WARD.			WEST WARD.			CENTRAL WARD.		
	Births.	Deaths.	Notifications.	Births.	Deaths.	Notifications.	Births.	Deaths.	Notifications.	Births.	Deaths.	Notifications.	Births.	Deaths.	Notifications.
1910.															
January
February
March
April
May
June
July
August
September
October
November
December

METEOROLOGY.

RAINFALL in 1910 at GOOLE, in the County of York.

Rain
Gauge. { Diameter of Funnel at top, 5in.
Height of Top—above ground, 1ft.
„ above sea level, 18ft.

Councillor Grayburn has kindly furnished me with the following particulars:—

Rainfall.				Temperature.		
Month.	Total Depth.	Greatest fall in 24 hours.	Number of Days on which ·01 or more fell.	Max.°	Min.°	Mean.°
	Inches.	Depth.				
Jan.	1·50	·47	15	53	17	39
Feb.	1·59	·36	15	53	33	42
March	·82	·30	8	55	30	45
April	1·83	·45	16	60	35	47
May	1·69	·41	14	75	39	55
June	2·46	1·02	10	83	48	65
July	4·15	1·18	11	75	50	60·5
August	3·63	·77	17	74	50	63·5
Sept.	·33	·17	5	68	45	57·5
Oct.	2·61	·68	10	69	46	53·8
Nov.	2·71	·87	12	54	26	42
Dec.	1·78	·58	14	55	29	43
Total	25·10		147			

TABLE C. 1910.

GOOLE URBAN SANITARY DISTRICT.

WATER SUPPLY—

Any development during 1910?	..	..	..	No.
Developments still needed..	..	..	..	None.
Any complaints as to (a) insufficiency?	..	..	..	No.
(b) unsatisfactory quality?	..	..	..	No.
(c) plumbo solvent action?	..	..	..	No.

SEWERAGE—Developments during 1910?	..	..	..	Shone system abandoned.
Developments still needed?	Adoption of method by gravitation for new scheme

SEWAGE DISPOSAL—Any complaint as to outfall works?	No.
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SCAVENGING—Any inadequacy, and where?	No.
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BY-LAWS—Any adopted or sanctioned during 1910?	New Streets and Buildings, Antitoxin Order, 1910, Housing (Inspection of District) Regulations, 1910.
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ADOPTIVE ACTS—Any steps taken for the consideration, adoption or application of:

(a) Notification of Births Act, 1907	..	..	No.
(b) Public Health Acts Amendment Act, 1907..	..	..	No.
(c) Other Adoptive Acts	..	..	No.

Regulated Buildings, Trades, &c.	No. in District.	No. on Register.	No. of Inspections.	General Condition.	Legal Proceedings.
Common Lodging Houses	.. 4	.. 4	.. 88	.. Fairly good.	.. 0
Canal Boats	.. 677	.. 677	.. 126	.. Good.	.. 0
Slaughter Houses	.. 2	.. 2	.. 320	.. Fairly good.	.. 0
Cowsheds	.. 3	.. 3	.. 30	.. Fairly good.	.. 0
Milk Purveyors	.. 16	.. 31	.. 10	.. Fair.	.. 0
Offensive Trades	.. 2	.. 2	.. 20	.. Tripe Boiler and Til age Works.	.. 0

COWSHEDS—Any special inspection made during 1910?	No.
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What arrangement for Veterinary Inspection of Dairy Cows?	None.
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INFECTIOUS DISEASE—

Any suspected spread by rats, dogs, cats, fowls, flies, or fleas	No.
What arrangements for supply of Antitoxin?	..	..	Supplied free on application to M.O.H. and to all patients removed to Sanatorium.

ISOLATION HOSPITAL—

Any observation on adequacy or efficiency	..	..	..	No.
Is any part used for other purpose than that originally intended?	..	..	..	No.

SCHOOLS—

Any investigations undertaken by Medical Officer of Health?	No.
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PREVENTION OF CONSUMPTION —What system of notification? .. Voluntary.									
				Its success? Yes.					
What arrangement for treatment of Patients on sanatorium lines? .. None.									
Any sanitary inspection of patients' houses? Yes.									
Any disinfection of ditto? Yes.									
Any distribution of advice? Yes.									
Any action re spitting? No.									
Any disinfection of public rooms, vehicles, &c.? No.									

HOUSING, TOWN PLANNING, etc., ACT—

No. of houses inspected during 1910?	No records kept yet.
No. of houses represented as unfit for habitation?	Three.
No. of houses dealt with by Closing Orders?	Three.
Are there any other houses unfit for habitation?	Probably.
Is house-to-house inspection systematically made?	Yes.
Are records kept in accordance with the 'Housing (Inspection of District) Regulations, 1910'?	Yes.
Are there any working-class dwellings erected by the Sanitary Authority?	No.
Any special activity in house building?	Yes.
No. of new houses built during 1910?	72
General character	Cottages and Villas.

INFANTILE MORTALITY—What organised effort to control it?

								Staff of Health Department.	
Is Health Visitor appointed by S.A.?				No.					
By other body?				No.					

NUISANCES—

Total No. of Nuisances in hand at close of 1909 .. 5.	At close of 1910 .. 6.
Reported during 1910 272.	Abated during 1910 266.
Total No. of Legal Notices served for Abatement of Nuisances during 1910 .. 8.	
Total No. of Summonses or other Legal Proceedings	1.
No. of Sink wastes disconnected during 1910	4.
" " " trapped	6.
No. of Closets newly constructed during 1910.. 2.	Kinds.. Pail closets
" reconstructed 40.	Kinds.. Ash pits.

MISCELLANEOUS—

Mean Temperature for Year 1910 ..	51.10	Rainfall ..	25.10
What mortuary accommodation (a) for accidents e'tc.	..	..	.. Yes.

BIRTHS DURING 1910 —Males.. .. 309. Females.. .. 321. Total 630.				
Number illegitimate, included in the above				29.
Number of Still Births (not included)				35.

DEATHS DURING 1910—(1) Gross Deaths, i.e., total actually registered in the district without any correction						290.
(2) Nett Deaths, on which the rates are calculated—						
Males .. 140.		Females .. 150.		Total ..	290	
Number uncertified, included in the above						None.

SANITARY REQUIREMENTS OF DISTRICT, AND SUGGESTIONS OF MEDICAL OFFICER OF HEALTH:—

More active measures in dealing with Infantile Mortality and Consumption.

TABLE B. 1910.**FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES & HOMEWORK.****1.—INSPECTION.**

	Premises.				No. of Inspections.		No. of Written Notices.			No. of Prosecutions.	
Factories	32	...	...	0	...	...	0
Workshops	156	...	...	4	...	...	0
Workplaces	26	...	...	0	...	...	0
Total	214	...	...	4	...	...	0

2.—DEFECTS FOUND.

Particulars.				Number of Defects.					Number of Prosecutions.	
				Found.	Remedied.	Referred to H.M. Inspector.				
Want of cleanliness	...	..	...	7	7	..	0	...	...	0
Overcrowding	...	...	...	1	1	...	0	...	...	0
Sanitary accommodation, unsuitable or defective	...	...	...	1	1	...	0	...	...	0
Breach of special sanitary requirements for bakehouses	...	...	...	2	2	...	2	...	...	0
Total	...	...	...	11	11	...	2	...	...	0

3.—HOME WORK.

Lists received from Employers twice in the year.												
Nature of Work.	Lists.	Outworkers.			Forwarded Notices to other Councils			Inspections of Outwork's* premises.				
		Con-tractors	Work-men.		served on Occupiers.	Failing to send lists.						
Wearing Apparel—making, &c.	3	...	2	...	1	...	3	1	...	1	...	5

4 —REGISTERED WORKSHOPS.

Workshops on the Register (S. 131) at the end of the year.									
Dressmaking and Millinery	...	...	...	...	...	...	...	...	31
Tailoring	...	...	...	...	...	...	...	...	6
Bootmaking and Repairing	...	...	...	...	...	...	...	...	13
Bakehouses	...	...	...	...	...	...	...	...	12
Others	...	...	...	...	...	...	...	...	26
Total number of workshops on register	...	...	...	...	...	...	...	...	88

5.—OTHER MATTERS.

Class.	Number
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (S. 133) ...	4
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (S. 5)	
Notified by H.M. Inspector ...	0
Reports (of Action taken) sent to H.M. Inspector ...	2
Other ...	0
Underground Bakehouses (s. 101) :—	
Certificates granted during the year...	0
In use at the end of the year ...	2

Sanitary Inspector's Annual Report, 1910.

GENTLEMEN,—I have pleasure in submitting my Annual Report on Sanitary Works and other improvements carried out in my Department during the year:—

No. of Inspections made (exclusive of Workshops)	...	...	2550
„ Preliminary Notices served	...	...	230
„ Verbal Notices	...	...	42
„ Statutory Notices issued by order of the Council	...	...	8
„ Summonses issued...	...	...	1
„ Nuisances not abated at close of year	...	...	6
„ House Drains repaired and defects remedied	...	...	52
„ New Inspection Chambers provided	...	...	12
„ Back Yards repaved and repaired	...	...	20
„ Kitchen Floors repaved and repaired	...	...	15
„ Removals of Fowls, Rabbits, etc.	...	...	21
„ Removals of Pigs	...	...	2
„ Dirty Houses and Out-premises cleansed, etc.	...	...	5
„ Hen Coops, Rabbit Hutches, etc., removed	...	...	19
„ Stables re-limewashed	...	...	8
„ Defective and Choked W.C.'s	...	...	10
„ Defective W.C. Soil Pipes and Ventilators	...	...	4
„ Defective Sink Pipes, new ones provided...	...	...	34
„ New Trapped Gullies provided in place of broken ones...	...	...	16
„ Houses Overcrowded	...	...	3
„ Houses Disinfected and Cleansed after Infection	...	...	119
„ Manure and other Refuse removed	...	...	16
„ Miscellaneous Nuisances dealt with	...	...	80
„ Privy Middens converted into Box Closets	...	...	40
„ Soil-boxes provided in place of Privy Middens	...	...	48
„ W.C.'s provided in place of Privy Middens	...	...	4
„ Urinals erected on Private Property	...	...	5
„ Urinals repaired	...	...	1
„ Defective and Broken Soil-boxes replaced by Galvanized Iron Ones	...	...	149
„ Defective Construction of Closet Seats (altered)	...	...	46
„ Insanitary Back Roads repaired (with ashes only)	...	...	9
„ Offensive Trades	...	...	1
„ Samples of Well Water taken for Analysis	...	...	3
„ Soil-boxes and Dry Dustbins emptied weekly	...	...	3839
„ Ashpits emptied once a month	...	...	289
„ Loads of Nightsoil removed during the year	...	...	9116
„ Loads of Lumber some Refuse removed (Monday and Friday Collection)	...	...	1426
„ New Dustbins provided in place of defective ones	...	...	27
„ Soil-box holes repaved	...	...	30
„ Fast Bedroom Windows made to open	...	...	10

Please note that several sanitary defects are occasionally included in one Notice, hence the number Nuisances abated above the number of Notices.

CANAL BOATS ACTS, 1877-84.

No. of Boats Inspected	...	...	...	...	...	126
„ Boats on the Register	...	...	...	...	...	677
„ Boats complying with the Acts	...	...	...	...	...	105
„ Boats contravening the Acts	...	...	...	...	...	21
„ Contraventions	...	...	...	...	...	34
„ Transferences of Ownership	...	...	...	...	...	27
„ Duplicate Certificates issued	...	...	...	...	...	17
„ Neglect of Owners not properly marking and numbering the Boats	...	...	...	...	...	4
„ Changes of Boats' names	...	...	...	...	...	0
„ Cases of Overcrowding	...	...	...	...	...	1
„ Young Girls over 12 years of age occupying Cabins	...	...	...	...	...	1
„ Boats Cabins re-painted	...	...	...	...	...	8
„ Dirty Cabins requiring more attention	...	...	...	...	...	2
„ Provisions of Water Casks	...	...	...	...	...	0
„ Notifications of Infectious Disease	...	...	...	...	...	0
„ Boats requiring re-registration because of structural alterations	...	...	...	...	...	0
„ Boats Registered	...	...	...	...	...	1
„ Boats Cancelled off the Register	...	...	...	...	...	3

The Cabins of the 126 Boats inspected were registered to accommodate the following number of persons :—Aft cabin, 361 adults and 73 children ; fore cabin, 235 adults and 30 children ; whilst the actual number occupying were 170 men, 71 women and 61 children.

It is pleasing to have again to report that no Infectious Disease has been notified during the year.

Thrift is keen and noticeable amongst a certain class of boat people. There are many cases I come across where the masters are working the cost of the boats off by instalments. This system appears to be much appreciated, as the masters, with a bit of luck and perseverance, in due course become the owners. In such cases it is rarely a contravention of the Acts is found, as the masters find it to their advantage to keep the cabins in good repair and order.

SLAUGHTER-HOUSE, MARKET AND TOWN SEIZURES.

Seventeen carcasses of beasts have been examined, 7 carcasses of which, along with all offals, were seized and condemned by a magistrate, and afterwards destroyed by burning. The offals of the others were destroyed, and the carcasses passed.

One pig was destroyed.

A sheep amongst a large flock was found to be nearly suffocated. It was immediately slaughtered, and, after inspection, the carcase was passed.

Occasionally small items of food-stuffs are destroyed which do not appear in this Report.

Coal dust from the hoists, smoke and smuts from the steamers. have caused the butchers much annoyance and expense for some years. Carcases which have been carefully dressed for food have on many occasions been thickly covered with coal dust, etc. This is poor encouragement for the butchers, who try to provide well for their customers. However, they have waited long and patiently, and will, without a doubt, rejoice when a new Public Slaughter-house is erected. Besides being a convenience to the Butchers, from a health point of view, such a building, under the control of your Authority, will have its advantages in many respects.

FOOD AND DRUGS ACT.

Ten samples of new milk have been purchased and forwarded to the County Analyst. All the samples were reported as being of good quality. Several samples were much above the standard (three per cent.) allowed by the Board of Agriculture.

WATER ANALYSIS.

Three samples of well water have been taken for analysis. Two were condemned, and the owners, after receiving notice, had the town's water laid on the premises (18 houses).

There are exceedingly few houses in the town which now derive their water supply from wells.

FRIED FISH SHOPS AND RESTAURANTS.

All the above places are regularly inspected, and generally found in a clean condition.

PUBLIC MORTUARY.

Four bodies have been conveyed to the Mortuary. All were practically strangers to the town. Regular inspections are made, and attention given to the building in keeping it clean and tidy.

COMMON REGISTERED LODGING HOUSES.

The four Lodging Houses have been regularly inspected. They have been kept clean and tidy. Occasional minor complaints have been made with regard to conducting the houses, opening windows, cleanliness, etc. On all occasions my requests have received reasonable satisfaction.

NIGHTSOIL SCAVENGING.

It is now upwards of 18 months since your Council, after spending much time and labour, decided upon a scheme whereby all nightsoil and other collections of house refuse should be buried under low-lying land. Since its commencement a decided improvement has been effected, and no complaints made. Within this time much nightsoil has been buried and thickly covered with earth, and during the coming spring the surface will be under cultivation.

The contractor has carried out his work satisfactorily.

ANNUAL COLLECTION OF NIGHTSOIL AND LUMBERSOME REFUSE.

			Loads of Nightsoil.	Loads of Lumbersome Refuse.
No. 1 District	...	...	2350	248
No. 2 District	...	...	3301	617
No. 3 District	...	...	3465	561
			<hr/> 9116	<hr/> 1426
			<hr/> Approximately 6875 Tons.	<hr/> 480 Tons.

NUMBER OF INSANITARY ASH-PITS DEMOLISHED AND GALVANIZED IRON SOIL-BOXES OR W.C.'s SUBSTITUTED DURING THE YEAR.

			No. of Ash-pits Demolished.	Double Pits.	Single Pits.	No. of Closets attached to Pits.	No. of Boxes provided in place.	No. of W.C.'s.
Groves, Old Goole	...	...	4	0	4	4	4	0
Couper Street	...	...	4	4	0	8	8	0
Swinefleet Road	...	...	1	0	1	1	0	1
Beverley Cottages	...	...	2	0	2	2	0	2
Back South Street	...	...	1	1	0	2	2	0
South Street	...	...	1	1	0	2	2	0
Albert Street	...	...	2	2	0	4	4	0
Victoria Street	...	...	1	0	1	1	0	1
Boothferry Road	...	...	3	0	3	3	3	0
Paradise Place	...	...	1	1	0	2	2	0
Pasture Road	...	...	8	0	8	8	8	0
First Avenue	...	...	6	0	6	6	6	0
Third Avenue	...	...	3	3	0	6	6	0
Third Avenue	...	...	3	2	1	5	5	0
			<hr/> 40	<hr/> 14	<hr/> 26	<hr/> 54	<hr/> 50	<hr/> 4

BEASTS, SHEEP, PIGS AND CALVES SLAUGHTERED AT THE
PUBLIC SLAUGHTER-HOUSE.

1910.

	Beasts.	Sheep.	Pigs.	Calves
January	119	165	181	—
February	100	144	136	—
March ...	103	143	126	25
April	143	217	106	4
May	108	222	79	1
June	114	264	63	2
July	138	328	101	—
August ...	109	245	79	2
September	107	200	87	—
October	141	219	115	2
November	112	142	131	1
December	119	143	237	—
	1413	2432	1432	37

SUMMARY.

	1909.		1910.		Increase.		Decrease.
Beast	... 1392	...	1413	...	21	...	—
Sheep	... 2518	...	2432	...	—	...	86
Pigs	... 1604	...	1432	...	—	...	172
Calves	... 19	...	37	...	18	...	—

PORT OF GOOLE.

Table showing Number and Tonnage of Vessels which have arrived during the
Years 1902 to 1910 inclusive.

Years	Number of Vessels		Total No. of Vessels, Foreign and Coastwise	Tonnage		Total Tonnage, Foreign and Coastwise
	Foreign	Coastwise		Foreign	Coastwise	
1902	1377	1098	2475	531943	328178	860120
1903	1336	1103	2439	537018	329897	864918
1904	1362	1232	2594	558864	384209	940073
1905	1548	1511	3059	613797	435410	1049207
1906	1892	1737	3629	758820	520275	1279095
1907	2097	1723	3820	874447	515385	1389832
1908	1896	1722	3618	783228	509959	1293187
1909	1979	1937	3916	815177	567546	1382723
1910	1945	2055	4000	804792	633882	1438674

